Rural Healthcare and Education

*259. SHRI S. ANBALAGAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have made any initiatives for improvement in rural healthcare and education in the country;

(b) if so, the details thereof and the achievements made thereon;

(c) whether it is a fact that the country is still lagging behind countries like China in development of rural healthcare and education; and

(d) if so, the details thereof and the concrete steps proposed to be initiated thereon by Government?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (d) The Human Development Report 2005, published by the UNDP, places India at rank 127 in Human Development (HDI) with 0.61 Education Index while China is placed at rank 85 in HDI Rank with 0.84 Education Index.

Keeping in view the inadequate health delivery system in the country, poor health infrastructure and low investment in health, the Government has launched National Rural Health Mission on 12.4.2005 in the entire country with special focus in 18 States which have weak public health indictors and/or weak infrastructure. The main goals of the NRHM are to provide accessible, affordable and accountable primary health care system. Key-strategies of the Mission are:

- Involvement and leadership of PRIs for the Health Sector.
- Creation of a cadre of Accredited Social Health Activists (ASHA) in 2.5 lakh villages in four years in a phased manner.
- Creation of village health team and preparation of village health plan.
- Strengthening sub-centres with United Fund of Rs. 10,000/- per annum.
- Codification of Indian Public Health Standards (IPHS).
- Raising 2000+CHCs to the level of IPHS.

- 100% PHCs for 24 hours referral services.
- Provision of 2nd doctor (AYUSH) at PHC.
- Supply of essential drugs, both allopathic and AYUSH to Sub-Centres.

The first year of the Mission is a preparatory period during which institutional mechanism to operationalise the mission are being set.

A Task Force on Medical Education under NRHM has been constituted to give their recommendations on the following:

(i) to make rural service attractive for doctors;

(ii) To promote medical colleges in the rural and other underserved areas;

(iii) To promote medical colleges in rural areas, the Task Group would *recommend whether a joint venture could be permitted whereby* the Government hospital at district level is allowed to be used for teaching purposes subject to the condition that the hospital continues to be run by the Government while recurring expenditure is borne by the private body; and

(iv) Modalities of strengthening the infrastructure of existing Government medical colleges particularly in the EAG and North Eastern States.

Regarding universalization of elementary education in the country and to improve literacy levels among the non-literates, the Government is implementing several schemes including Sarva Siksha Abhiyan (SSA), Mid-day-Meal Scheme etc. Separate National Literacy Mission has been set up to make concerted efforts at planning and implementation level to achieve the objectives of imparting functional literacy to the non-literates with special emphasis on low female literacy districts and other districts having lower literacy rates. Schemes are being implemented in the Secondary and Higher/Technical Education with the aim or providing access to the quality education and develop human capital to meet the present and future needs.

Initiatives undertaken to improve the education in the country are:

- Constitution of India has been amended according to which " the State shall provide Free and Compulsory Education to all the

children of the age 6-14 years in such manner as the State may, by law, determine".

- To increase the public expenditure on education in a phased manner to reach 6% of GDP with 7% growth rate. Government had imposed 2% Education Cess from 2004 on all direct taxes to fund basis quality education.
- Central Advisory Board on Education was reconstitued in August, 2004 and National Curriculum Framework for school education had been revised.
- Development of primary health care infrastructure for the urban slum areas.

Iron ore produced in India

*260. SHRIMATI SUSHMA SWARAJ: Will the Minister of STEEL be pleased to state:

(a) the quantum of total deposits of 'iron ore' available in India;

(b) whether 'iron ore' is exported from India;

(c) if so, the quantum of 'iron ore' exported during the last three years;

(d) if this pace of export countinues, after how many years 'iron ore' will be exhausted;

(e) whether any concern has been expressed by some on this export; and

(f) whether Government propose to restrict this export?

THE MINISTER OF STEEL (SHRI RAM VILAS PASWAN): (a) The deposits of iron ore based on United Nations Framework Classification (UNFC) as on 1.4.2000 is as mentioned below:

(Unit: '000 tonnes)

Grade	Resource as on 1.4.2000
Haematite	11,425,788
Magnetite	10,682,207
Total	22,107,995

Source: Indian Bureau of Mines, Nagpur